

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS69AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/06/2009
NAME OF PROVIDER OR SUPPLIER ALTA CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 2007 ALTA DRIVE LAS VEGAS, NV 89106		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an annual State Licensure survey and a complaint investigation conducted at your facility on 8/6/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility was licensed for six Residential Facility for Group beds for elderly and disabled persons, persons with mental illness, and/or persons with chronic illness Category I residents. The census at the time of the survey was five residents. Five resident files were reviewed and four employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D. Complaint #NV00021188 was unsubstantiated. The following deficiencies were identified:	Y 000		
Y 070 SS=F	449.196(1)(f) Qualifications of Caregiver-8 hours training NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility.	Y 070		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 This Regulation is not met as evidenced by: Based on interview and record review on 8/6/09, the facility failed to ensure 3 of 4 caregivers received eight hours of annual training (Employee #1, #2 and #4). Severity: 2 Scope: 3	Y 070		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility failed to ensure 4 of 4 employees complied with NAC 441A.375 regarding tuberculosis testing (Employee #1, #2, #3 and #4) for the protection of all residents. Resident #1 failed to have evidence of a positive TB test and annual signs and symptoms although a negative chest x-ray was in the file. Employee #2 failed to have an annual TB test. Employee #3 failed to show evidence of a two step TB test. Employee #4 failed to have evidence of a negative chest x-ray and annual signs and symptoms. This was a repeat deficiency from the 10/24/09 State Licensure survey. Severity: 2 Scope: 3	Y 103		

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Y 105	Continued From page 2	Y 105		
Y 105 SS=D	<p>449.200(1)(f) Personnel File - Background Check</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.</p> <p>This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility failed to ensure 1 of 4 employees had background checks completed (Employee #3). Employee #3 did not have evidence of fingerprints.</p> <p>Severity: 2 Scope: 1</p>	Y 105		
Y 172 SS=C	<p>449.209(2) Health and Sanitation-Outside garbage</p> <p>NAC 449.209 2. Containers used to store garbage outside of the facility must be kept reasonably clean and must be covered in such a manner that rodents are unable to get inside the containers. At least once each week, the containers must be emptied and the contents of the containers must be removed from the premises of the facility.</p> <p>This Regulation is not met as evidenced by: Based on observation on 8/6/09, the facility failed to ensure 2 of 3 containers used to store garbage outside the facility was covered.</p> <p>Severity: 1 Scope: 3</p>	Y 172		

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Y 274 SS=C	<p>449.2175(5) Service of Food - Substitutions</p> <p>NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal.</p> <p>This Regulation is not met as evidenced by: Based on interview and observation on 8/6/09, the facility failed to ensure menu substitutions were documented. The facility failed to follow the posted menu for 2 of 2 meals served thus far today.</p> <p>Severity: 1 Scope: 3</p>	Y 274		
Y 320 SS=D	<p>449.220(1) Bedroom Doors - Locks</p> <p>NAC 449.220 1. A bedroom door in a residential facility which is equipped with a lock must open with a single motion from the inside unless the lock provides security for the facility and can be operated without a key or any special knowledge.</p> <p>This Regulation is not met as evidenced by: Based on observation on 8/6/09, the facility failed to ensure 1 of 8 bedrooms (Bedroom #7) was not equipped with a double motion lock.</p> <p>Severity: 2 Scope: 1</p>	Y 320		

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Y 371	Continued From page 4	Y 371		
Y 371 SS=F	449.224(2) Housing for Staff Members NAC 449.224 2. Members of the staff of the facility and their families who live at the facility shall be deemed residents of the facility for the purposes of determining the number of toilets, lavatories and tubs or showers used by the members of the staff of the facility or their families must comply with the provisions of NAC 449.222 This Regulation is not met as evidenced by: Based on observation and interview on 8/6/09, the facility failed to comply with the provisions of NAC 449.222. The facility failed to ensure a flush toilet for each four residents. The facility had four residents, one boarder, one caregiver, the owner, the owner's mother and another family member living at the facility with two flushing toilets. Severity: 2 Scope: 3	Y 371		
Y 528 SS=C	449.260(1)(c) Activities for Residents NAC 449.260 1. The caregivers employed by a residential facility shall: (c) Plan recreational opportunities that are suited to the interests and capacities of the residents.	Y 528		

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Y 528	Continued From page 5 This Regulation is not met as evidenced by: Based on interview and observation on 8/6/09, the facility failed to provide at least ten hours of activities each week that were suitable to the interest and capacities of the residents. Severity: 1 Scope: 3	Y 528			
Y 878 SS=D	449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Based on record review and interview on 8/6/09, the facility failed to ensure 1 of 5 residents received medications as prescribed (Resident #3). Resident #3 was prescribed Carbidopa 25/Levodopa 100 MG to be given three times a day, the facility failed to ensure the medication was available for the resident. This was a repeat deficiency from the 10/24/09	Y 878			

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Y 878	Continued From page 6 State Licensure survey. Severity: 2 Scope: 1	Y 878		
Y 898 SS=C	449.2744(1)(b)(4) Medication / MAR NAC 449.2744 1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include: (4) Instructions for administering the medication to the resident that reflect the current order or prescription of the resident's physician. This Regulation is not met as evidenced by: Based on interview and record review on 8/6/09, the facility failed to ensure the medication administration record (MAR) was accurate for 3 of 5 residents (Resident #1, #2 and #3). The caregiver already signed all medications on the MAR for 8/6/09, morning and evening doses when the surveyor arrived at 8:45 am. Interview with Resident #2 revealed he had not yet taken his morning medications. Severity: 1 Scope: 3	Y 898		
Y 908 SS=C	449.2746(2)(a)-(f) PRN Medication Record	Y 908		

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Y 908	<p>Continued From page 7</p> <p>NAC 449.2746</p> <p>2. A caregiver who administers medication to a resident as needed shall record the following information concerning the administration of the medication:</p> <p>(a) The reason for the administration.</p> <p>(b) The date and time of the administration;</p> <p>(c) The dose administered;</p> <p>(d) The results of the administration of the medication;</p> <p>(e) The initials of the caregiver; and</p> <p>(f) Instructions for administering the medication to the resident that reflect each current order or prescription of the resident ' s physician.</p> <p>This Regulation is not met as evidenced by: Based on interview and record review on 8/6/09, the facility failed to ensure the medication record was complete for 1 of 1 residents receiving as needed (PRN) medications (Resident #3). Resident #3 was prescribed Temazepam 30 mg to be given at bedtime as needed. Temazepam was listed on the MAR and signed by the caregiver that was given each night. The surveyor opened the two available bottles of Temazepam and neither bottle was opened. The surveyor interviewed the Employee #2 who stated Resident #3 no longer takes Temazepam and she signed the MAR in error. The facility failed to provide a DC order for the medication.</p> <p>This was a repeat deficiency from the 10/24/09 State Licensure survey.</p> <p>Severity: 1 Scope: 3</p>	Y 908			

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Y 920 SS=F	<p>449.2748(1) Medication Storage</p> <p>NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key.</p> <p>This Regulation is not met as evidenced by: Based on observation on 8/6/09, the facility failed to keep medications for 1 of 1 residents who was capable of self administering medications without supervision, kept their medication in a locked container in their room. (Resident #5). Unlocked medications for the owner's family members were found in Bedroom #3 and in the kitchen. Unlocked medications for the facility boarder were found in Bedroom #6. Over the counter pain medication was found unsecured in Bedroom #2.</p>	Y 920			

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Y 920	Continued From page 9 This was a repeat deficiency from the 10/24/09 State Licensure survey. Severity: 2 Scope: 3	Y 920		
Y 923 SS=E	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be: (b) Kept in its original container until it is administered. This Regulation is not met as evidenced by: Based on observation on 8/6/09, the facility failed to keep medications belonging to 2 of 5 residents in their original container (Resident #1 and #2). Two cups of pre-poured medications for Resident #1 were found in Bedroom #2 and pre-poured medications for Resident #2 were found in the medication cart. Severity: 2 Scope: 2	Y 923		
Y 936 SS=F	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the	Y 936		

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Y 936	<p>Continued From page 10</p> <p>facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation:</p> <p>(e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 8/6/09, the facility failed to ensure 2 of 5 residents complied with NAC 441A.380 regarding tuberculosis (Resident #2, and #3) which affected all residents. Resident #2 failed to have evidence of an annual TB test. Resident #3 failed to have evidence of a two step TB test.</p> <p>This was a repeat deficiency from the 10/24/09 State Licensure survey.</p> <p>Severity: 2 Scope: 3</p>	Y 936			

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